CITY OF LINDEN

Citizen Leadership Form

| [, | hereby apply to perform public service on the |
|---|--|
| following municipal authorities, boards or | commissions: |
| a) | |
| | |
| b) | |
| c) | |
| | |
| | |
| Name | |
| | |
| City, State | Zip Code |
| you listed above: | o the authorities, boards or commissions which |
| | |
| Personal Information N | ot Subject to Public Disclosure |
| Primary Phone Number | Secondary Phone Number |
| Address of Residence | |
| Email Address | |
| *The information in this section is considered po the purpose of P.L. 1963 (C.47:1A-1 et seq.) and | ersonal information, and therefore deemed confidential fo d P.L. 2001, c. 404 (C.47:1A-5 et al.). |

This form can be faxed to the City Clerks office at 908-474-8451
OR
mail to 301 North Wood Ave., Linden, NJ 07036.